

**North Carolina Department of
Agriculture and Consumer
Services
Structural Pest Control & Pesticides Division**

**APPLICATION FOR
CONTINUING CERTIFICATION
UNITS (CCU'S)**

Application for structural pest control CCU's should include:

- ☐ all sections of application appropriately marked.
- ☐ resume or detailed outline of structural pest control education, work, or training experience.
- ☐ comprehensive outline of training course or program.
- ☐ visual training aids, i.e., video tape(s), overheads, slides (or narrative script of slides), or presentation handouts.
- ☐ signature of trainer.

Return application to:

Certification & Training Coordinator
North Carolina Dept of Agriculture
And Consumer Services
Structural Pest Control &
Pesticides Division
1090 Mail Service Center
Raleigh, NC 27699-1090
Phone: 919/733-6100

CCU's are awarded by the **Structural Pest Control Committee** upon satisfactory completion of one clock hour of instruction in a course approved by the *Structural Pest Control & Pesticides Division (SPCPD)*. Only whole hour CCU's are assigned.

Return application to the SPCPD at least 30 days prior to the date of training.

Date of application:		Name of trainer:			
Phone #:		Name and address of training agency:			
Fax #:					
Title of course or program:					Course renewal? <input type="checkbox"/> YES <input type="checkbox"/> NO Previous course ID # _____
Name and phone number of person responsible for submitting course attendance verification form(s) to SPCD:					
Training date(s) / location(s):		The recertification training course/program will contain the following general standards for certification of pesticide applicators (check appropriate categories) <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> LABEL & LABELING COMPREHENSION <input type="checkbox"/> SAFETY <input type="checkbox"/> ENVIRONMENT <input type="checkbox"/> PESTS </div> <div> <input type="checkbox"/> PESTICIDES <input type="checkbox"/> PESTICIDE EQUIPMENT <input type="checkbox"/> APPLICATION TECHNIQUES <input type="checkbox"/> LAWS & REGULATIONS </div> </div>			
This course is intended for pesticide applicator training in the following structural pest control phases: (check one or more) <input type="checkbox"/> Household Pest Control (P) <input type="checkbox"/> Wood-Destroying Organisms (W) <input type="checkbox"/> Fumigation (F)		Length of training: P _____ W _____ F _____	Number of CCU's expected: P-phase W-phase F-phase	<div style="display: flex; justify-content: space-between;"> <div> CCU'S AWARDED <input type="checkbox"/> VA _____ <input type="checkbox"/> SC _____ <input type="checkbox"/> GA _____ </div> <div> CCU'S AWARDED <input type="checkbox"/> KY _____ <input type="checkbox"/> TN _____ <input type="checkbox"/> _____ (other) </div> </div>	
I understand that it is my responsibility in providing approved North Carolina structural pest control recertification training to duplicate and to maintain a record of course attendance for 5 (five) years from the date of presentation.					
Signature of trainer:		Resume attached: <input type="radio"/> Yes <input type="checkbox"/> No		Course outline attached: <input type="radio"/> Yes <input type="checkbox"/> No	
Did you include video tapes, slides, overheads, or presentation handouts with this application? <input type="radio"/> Yes <input type="checkbox"/> No Do you require visual training aids be returned? <input type="radio"/> Yes <input type="checkbox"/> No					
OFFICE USE ONLY					
RCVD	FY	APPR	CRS #	CCU'S P	W F G

